PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10824207

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
To	TAL CLAIMS								T eec	רטה ד			
101/12 05 11110			28		·			RATE	FEE	-	RATE	FEE	
FC)R 		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			28 minus 20=		* 8			X\$ 9=		OR	X\$18=		
INE	DEPENDENT C	LAIMS	3 minus 3 =					X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "C						column 2	•	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II								OTHER THAN					
		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		-		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
	·							TOTAL		OR	TOTAL ADDIT, FEE	-	
		(Column 1)	ADDIT. FEE			ADDIT. FEET							
		CLAIMS		(Colum	EST	(Column 3)	lг		ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE ⁻	TIONAL FEE	
	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .		X43=		OR	X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									0.1			
f/I								+145=		OR	+290=	•	
	"							TOTAL DDIT, FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)												•	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	IER .	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	٠.	
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									٠,١			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	· ·	
**	f the "Highest Nur	mber Previously Pa	id For IN THIS	SPACE is	less than	1 20, enter "20."	• . AI	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE		
	r the "Highest Nui The "Highest Num	mber Previously Pa ber Previously Paid	io For IN THIS I For (Total or	SPACE is Independe	iess than	n 3, enter "3." highest numbe	r foun	nd in the app	ropriate box	in col	ımn 1.		